

For office use only

Date received { FORMTEXT }

Date issued { FORMTEXT }

Case no.

{ MERGEFIELD			
FW_OP_FW_COP_REF }	•		

Full name of person to whom the application relates (this is the name of the person who lacks, or is alleged to lack, capacity)

{ MERGEFIELD FW_PER_REL_FW_CLI1_TITLE \f" " }{ MERGEFIELD
 "FW_PER_REL_FW_CLI1_FNAME" \f" " }{ MERGEFIELD
 "FW_PER_REL_FW_CLI1_MNAME" \f" " }{ MERGEFIELD
 "FW_PER_REL_FW_CLI1_SNAME" }



Please read first

- This form can be used in a variety of circumstances and must be used for applications within proceedings. For further guidance on when this form is to be used please see the Court of Protection Rules 2007 and the Practice Directions accompanying the Rules or contact Customer Services at the number below.
- If you wish to apply to start proceedings please complete the COP1 application form.
- If you wish to apply to be joined as a party to the proceedings please complete the COP10 application notice for applications to be joined as a party.
- You may have to pay a fee when you make an application. Refer to the leaflet COP44 Court of Protection Fees for details.
- You may need to pay for any costs you incur during the proceedings. If the court considers that you have acted unreasonably you can be ordered to pay the costs incurred by other parties.

- Please continue on a separate sheet of paper if you need more space to answer a question. Write the case number, your name, the name of the person to whom the application relates, and number of the question you are answering on each separate sheet.
- For assistance in completing this form please see guidance notes and website: www.gov.uk/courtof-protection
- Court of Protection staff cannot give legal advice. If you need legal advice please contact a solicitor.

Section 1 - Your details

1.1	Your details	FORMCHE	ECKBOX } Mr. CKBOX } Miss CKBOX } Other {	<pre>{ FORMCHE({ FORMCHE(FORMCHE(FORMTEXT })</pre>	-	{ {	
	First name	{ FORMTEXT }					
	Middle name(s)	{ FORMTEXT }					
	Last name	{ FORMTE	{ FORMTEXT }				
1.2	Address (including postcode)	{ FORMTE	XT }				
	Telephone no.	Daytime	{ FORMTEXT }				
		Evening	{FORMTEXT}				
		Mobile	<pre>{FORMTEXT }</pre>				
	E-mail address	{ FORMTE	XT}				
1.3	Is a solicitor represe	nting you?			{ FORMCHEC FORM	KBOX } Yes { CHECKBOX } No	
	If Yes, please give the	ne solicitor's	details.				
	Name	{ FORMTEXT }					
	Address (including postcode)	{ FORMTEXT }					
	Telephone no.	{ FORMTE	XT }	Fax no.	{ FORMTEXT	}	
	DX no.	{ FORMTE	XT }				
	E-mail address	{ FORMTE	XT }				
1.4	To which address sh	nould all offici	al documentatior	be sent?			

{ FORMCHECKBOX } Your address

{ FORMCHECKBOX } Your solicitor's address

{ FORMCHECKBOX } Other address (please provide details)

{FORMTEXT }

{ FORMCHECKBOX } Applicant (the person who filed the COP1 application form)

{ FORMCHECKBOX } Person to whom the application relates

{ FORMCHECKBOX } Other party to the proceedings

{ FORMCHECKBOX } Other (please give details)

{ FORMTEXT }

Section 2 – Your application

2.1 What order or direction are you seeking from the court?

{FORMTEXT }

2.2 Please set out the grounds on which you are seeking the order or direction?

{ FORMTEXT }

2.3 Any evidence in support of your application must be filed with this application notice. If you are attaching any written evidence please use the COP24 witness statement form.



If the court requires that evidence be given by affidavit then you need to

use the COP25 affidavit form.

2.4 Please provide the details of any person who you reasonably believe has an interest which means they ought to be heard by the court in relation to this application notice and who is not already a party to the proceedings.

Full name including title	Full address including postcode	Connection to the person to whom the proceedings relate
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }

Section 3 - Statement of truth

The statement of truth is to be signed by you, your solicitor or your litigation friend.

*(I believe) The applicant believes that the facts stated in this annex are true.

Signed		
	*Applicant('s litigation friend)('s solicitor)	
Name	{ FORMTEXT }	
Date	{ FORMTEXT }	
Name of firm	{ FORMTEXT }	
Position or office held	{ FORMTEXT }	* Please bracke

* Please delete the options in brackets that do not apply.

Now read note 1 about what you need to do next.

Guidance notes

Note 1

What you need to do next

The court requires two copies (i.e. the original plus one copy) of each form and document you file.

Please return the original completed form and copies to the Court of Protection, along with any fee. For details on where to send your application check the website: www.gov.uk/court-of-protection

Note 2

What happens next?

The court will notify you when your application notice has been issued. The court will return a sealed copy of the application notice. You may need to serve copies on:

- · every other party to the proceedings;
- anyone who is named as a respondent in the application notice; and
- any other person as the court may direct.